

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION			6/17/61
O.I.P.E. CLASSIFIER			6/17
FORMALITY REVIEW	14	915	6/28-61
RESPONSE FORMALITY REVIEW			

## INDEX OF CLAIMS

✓ ..... Rejected  
 = ..... Allowed  
 — (Through numeral)... Canceled  
 ÷ ..... Restricted

N ..... Non-elected  
 I ..... Interference  
 A ..... Appeal  
 O ..... Objected

Claim	Final Original	Date
1	Original	6/17/61
2	Original	6/17/61
3	Original	6/17/61
4	Original	6/17/61
5	Original	6/17/61
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44	Original	6/17/61
45	Original	6/17/61
46	Original	6/17/61
47	Original	6/17/61
48	Original	6/17/61
49	Original	6/17/61
50	Original	6/17/61

If more than 150 claims or 10 actions  
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AVAILABLE COPY